



Iowa Medicaid ICD-10 Collaborative Testing Tool Instructions

Test Partners

May 19, 2015

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Iowa Medicaid ICD-10 Testing Overview

We are pleased that you have chosen to participate in ICD-10 testing with the Iowa Medicaid Enterprise (IME). The IME has two testing tools available for Billing Agents/Providers:

1. **Direct Claims Submittal** – This tool returns the 277 Claims Acknowledgement, 999 Implementation Acknowledgement and an electronic 835 Remittance Advice. Coding validation and revenue comparisons are not available with this tool. Submitters may begin the external End-to-End (E2E) process by sending ICD-10 test claims batches through their [EDISS Connect](#) account. Please refer to [EDISS ICD-10 Testing](#) for further testing instructions.
2. **Collaborative Testing Tool (CollabT)** – This tool includes batch submittal, coding validation reports, clinical test cases, and revenue comparison evaluations.

This document contains the step-by-step instructions to setup and test using the IME Collaborative Testing Tool.

There are two test methodologies available for Billing Agents/Providers:

1. **End-to-End (E2E) Level 3 External Testing** – A batch based process with limited coding and revenue comparisons.
2. **Business-to-Business (B2B) Level 3 External Testing** – A clinical scenario based process with coding validation between ICD-9 and ICD-10, provider taxonomy test programs, and revenue comparisons. B2B Testing is only available within the CollabT Tool.

The IME is tracking industry concerns related to the October 1, 2015 implementation date. The ICD-10 Testing process has been developed to mitigate these concerns for IME Providers. Below is a brief listing of these concerns and the IME mitigation strategy:

- **Receiving payments during transition:** CollabT E2E and B2B testing contain feedback throughout claims process via EDI 5010 X12 transactions, such as 277CA, 999 Acknowledgement, and 835 remittance advice. Additionally, the tool contains revenue analysis reporting by inpatient, outpatient and professional claims and practice specialty.
- **Acceptance Rate:** The IME has scheduled several test iterations to resolve any acceptance rate issues by individual provider or across all providers. The mitigation strategy is to publish testing results that by provider type, size of provider, number of claims per submitter, percentage of successful claims, and issue specifics.
- **Quality Metrics and Value-based Modifiers:** Potential mitigation strategy under internal discussion.

- **Cash Flow Impact:** The IME mitigation strategy is to identify any potential payment disruptions at the earliest possible date. Identified potential disruptions will be categorized by provider type with a mitigation strategy. All identified disruptions will be published on the [IME ICD-10 webpage](#).
- **Electronic Health Record Vendors (EHR):** At the present time, the IME ICD-10 Project Manager is working with WEDI to create a vendor webpage. A link to that site will be added to the [IME ICD-10 webpage](#).

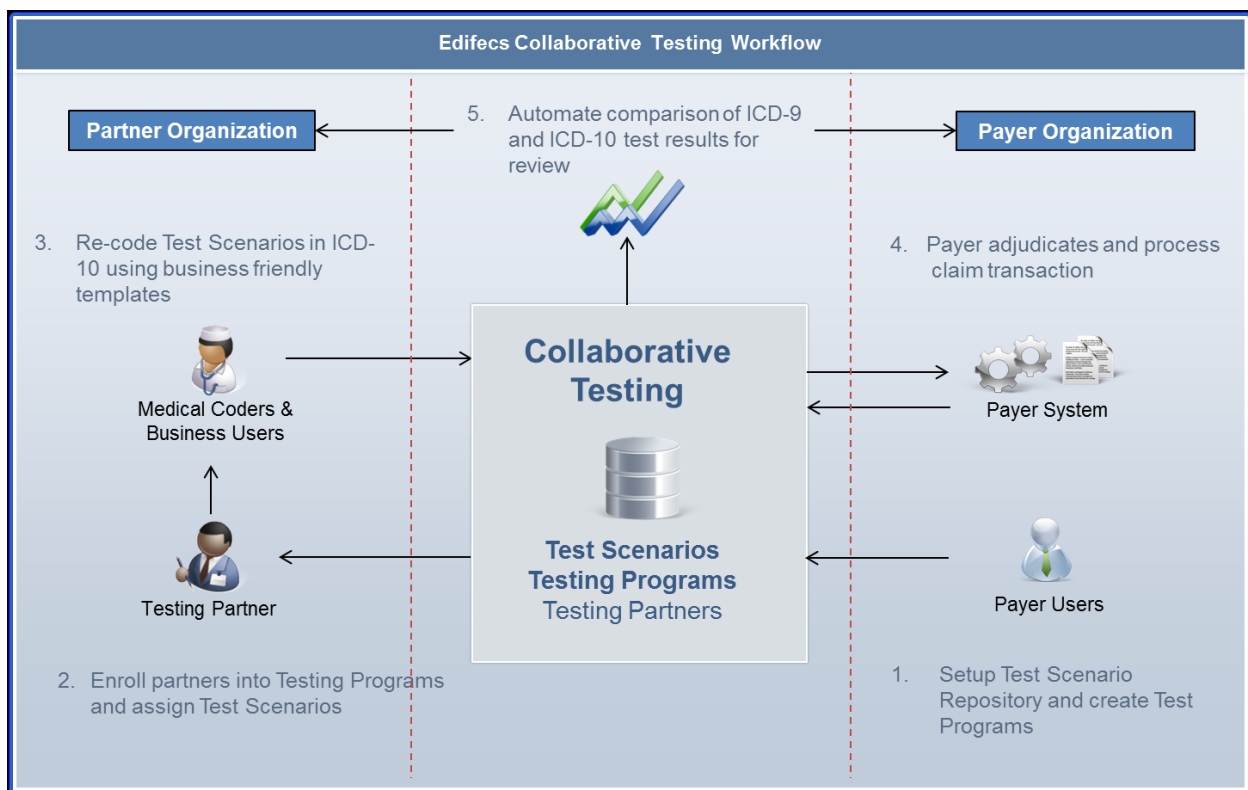
Contact Information

If you have any questions regarding ICD-10 testing, please contact IME Provider Services at 1-800-338-7909. Choose option 1, and then choose option 7. Locally in Des Moines, you may call (515) 256-4609. Choose option 1, and then choose option 7. You may also send an email to ICD-10project@dhs.state.ia.us

ICD-10 Collaborative Testing Tool

The ICD-10 Collaborative Testing Tool is provided to IME Test Partners at no cost. As a Payer, the IME creates test programs and test scenarios, assign test scenarios to each test program, and enroll partners to the test programs for testing. Partners, on the other side, recode the test scenarios in ICD-10 with the help of specialized medical coders and execute the test scenarios to process the claims. Collaborative Testing sends the claim file to the payer organization for processing. Based on the compliance checks made by user guidelines, Collaborative Testing stores the responses in the execution runs and lets the payer compare the ICD-9 and ICD-10 codes.

The following image shows the Collaborative Testing workflow.



Test Partner Registration

Billing Providers wanting to participate in ICD-10 Testing will need to register with IME Provider Services by completing the online [ICD-10 External Testing Registration Form](#). For any issues or questions please contact the IME Provider Services Unit at 1-800-338-7909, locally in Des Moines at 515-256-4609 or send an email to ICD-10project@dhs.state.ia.us. The following information is required for the registration.

- Organization Name
- Billing Address, City, State and Zip Code
- Tax ID Number
- Billing NPI
- Rendering/Treating NPI numbers to be used when submitting ICD-10 test claims
- Contact Name
- Contact Email
- Testing Methodology – Direct Submitter, CollabT or both
- Initial Testing Cycle

Test Partner Administrative Setup

CollabT Setup

IME Provider Services will contact the registrant to discuss the partner's setup requirements and training needs.

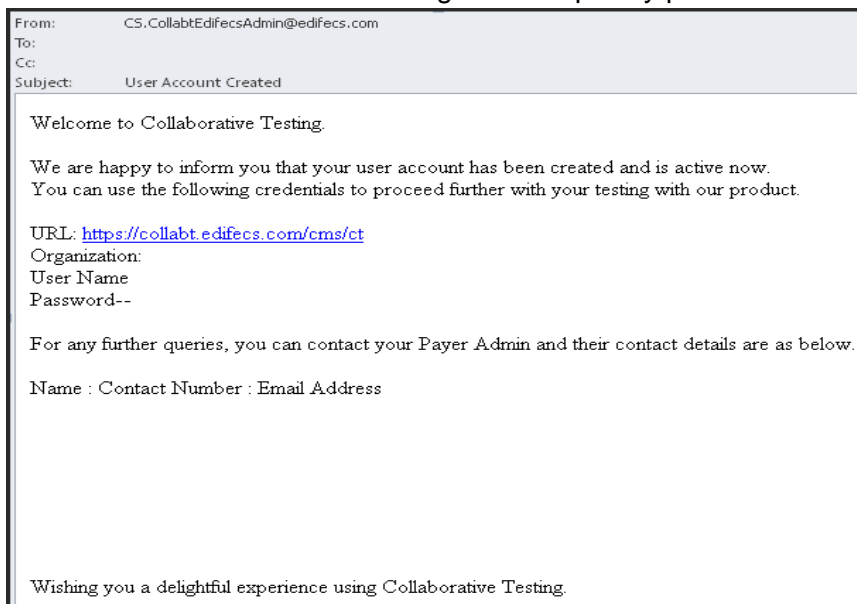
Test Partner Organization Administrator

Test Partners must have a minimum of one Partner Organization Administrator. The IME creates the first Test Partner Organization Administrator from the registration form. CollabT sends a welcome email from CS.CollabtEdifecsAdmin@edifecs.com that will contains:

- URL link to the testing tool
- User name (email submitted to Iowa Medicaid)
- Temporary password
- Contact information for the ICD-10 team at Iowa Medicaid
- Please note** It is recommended to run CollabT using the Google Chrome or Firefox browser.
- It is also recommended that the *Incognito* function be used to access the software. This function does not save any data to the browser cache and eliminates potential sign-on issues at a later time.

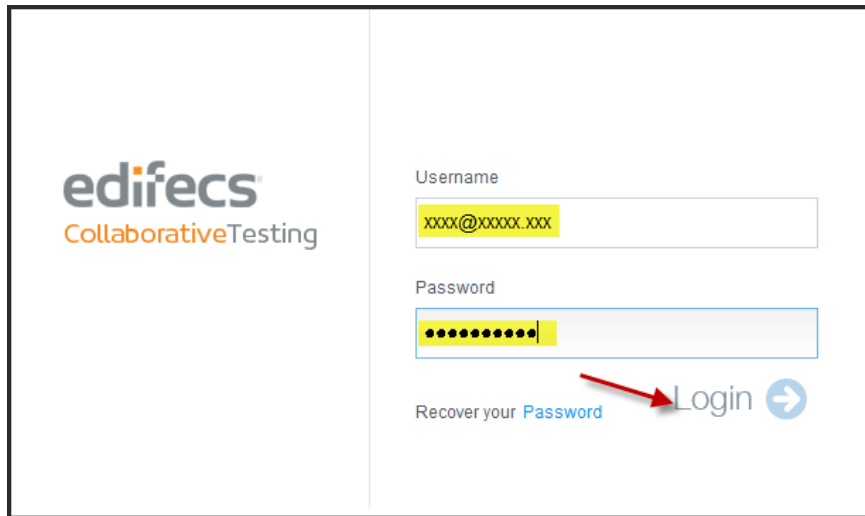
Initial CollabT Email

Each user will receive an initial login email with username and temporary password. It is recommended that the user change the temporary password to a password of their choosing.



Initial Login

- Click on <https://collabt.edifecs.com/cms/ct/#/login>

The image shows a login page for Edifecs Collaborative Testing. On the left is the Edifecs logo. On the right, there are two input fields: 'Username' with a placeholder 'XXXX@XXXX.XXX' and 'Password' with a masked password '.....'. Below the password field is a link 'Recover your Password'. To the right of these fields is a 'Login' button with a right-pointing arrow. A red arrow points from the 'Recover your Password' link to the 'Login' button.

- Enter the assigned **Username** from the CollabT Welcome email.
- Enter the temporary **Password** provided in the CollabT Welcome email
- Click on **Login**

Accept the End User License Agreement and Business Associate Agreement

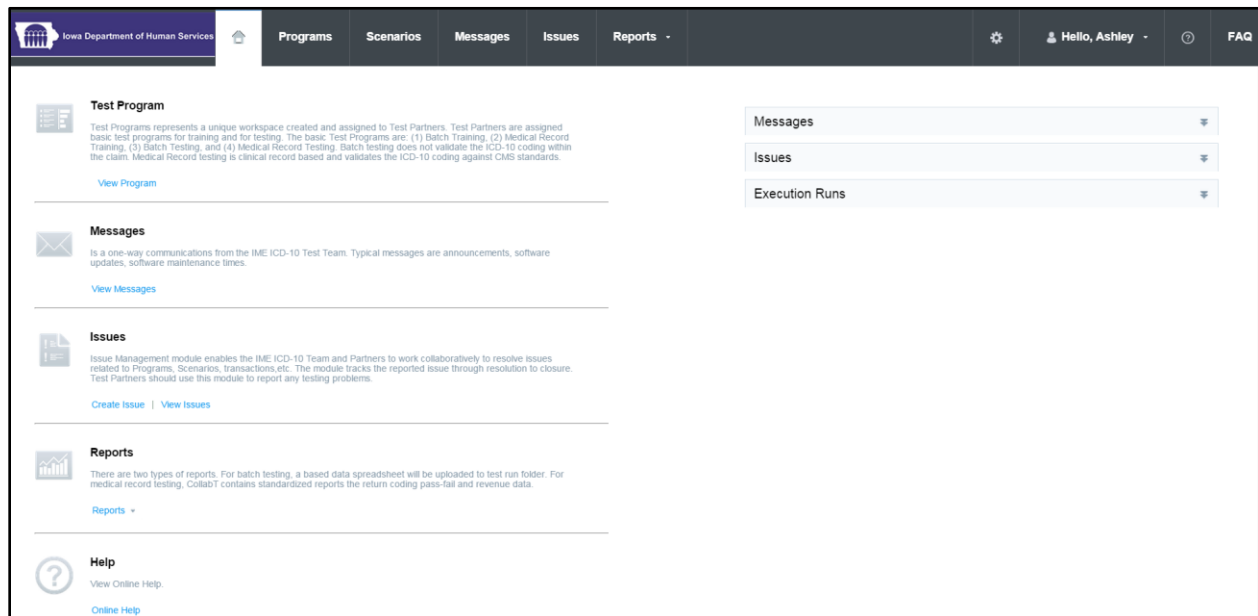
Users must accept the EULA. The agreements address the HIPAA mandated privacy policies for the protected health information.

The image shows a window titled 'End User License Agreement (EULA)'. The main heading is 'End User License Agreement and Business Associate Agreement'. The text describes the contract between Edifecs, Inc. and the user for Medicare and Medicaid Services (CMS) to provide testing and analysis. At the bottom, there is a scrollable area for the full text of the EULA and BAA, and two buttons: 'Accept' and 'Decline'.

- Click on **Accept**

Home Page Overview

The CollabT Testing Home page will appear.



CollabT basic functions are available from the home screen. The functions are:

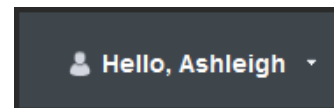
- **Test Program** – represents a unique workspace created and assigned to Test Partners. Test Partners are assigned basic test programs for training and for testing. The basic Test Programs are: (1) Medical Record Training, (2) Batch Testing, and (3) Medical Record Testing. Batch testing does not validate the ICD-10 coding within the claim. Medical Record testing is clinical record based and validates the ICD-10 coding against CMS standards.
- **Partner** – is a provider with a billing National Provider Identification (NPI) number registered to test with the IME.
- **Test Scenario** – is an individual claim under a medical record test program. For example, the Family Practice Test Program contains several scenarios based on a rendering provider's taxonomy.
- **Messages** – is a one-way communications from the IME ICD-10 Test Team. Typical messages are announcements, software updates, and software maintenance times.
- **Issues** – enables the IME ICD-10 Team and Partners to work collaboratively to resolve issues related to Programs, Scenarios, transactions, etc. The module tracks the reported issue through resolution to closure. Test Partners should use this module to report any testing problems.

- **Reports** – there are two types of reports. For batch testing, a based data spreadsheet will be uploaded to test run folder. For medical record testing, CollabT contains standardized reports the return coding pass-fail and revenue data.
- **Help** – view online help

Change Password

CollabT users are allowed to change the account password at any time. The IME recommends changing the temporary password immediately following the initial login.

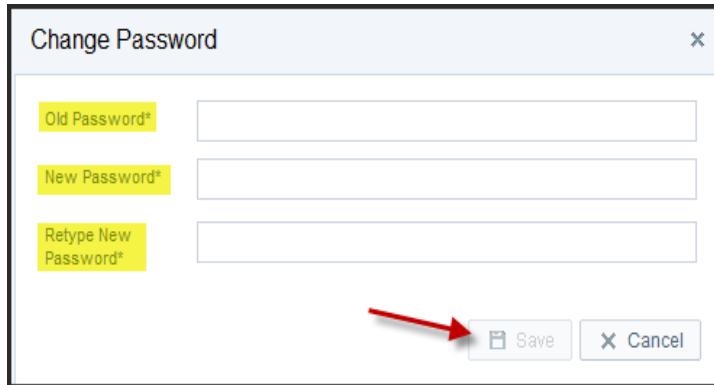
- Click on **Hello,**_____ to view the user's profile.
- Click on **Change** next to password



My Account

ID	201898
User Name	
Role	Organization Administrator
Password	xxxxxxxx Change
Account Status	Active
Created On	December 5, 2014
Created By	

- Users must enter the **Old Password** and the **New Password** twice.
- Click **Save** when finished.



A dialog box titled "Change Password" with a close button (X) in the top right corner. It contains three input fields: "Old Password*", "New Password*", and "Retype New Password*", each with a yellow label. At the bottom right, there are two buttons: "Save" (with a floppy disk icon) and "Cancel" (with an X icon). A red arrow points to the "Save" button.

Exercise 1: Change Password

- ✓ Login to CollabT using the temporary password from email.
- ✓ Change your password
- ✓ Log out of CollabT
- ✓ Login to CollabT using the new password

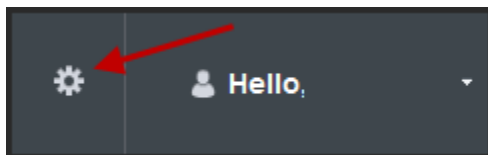
User Types

Test Partner administrators are able to enroll as many users as needed to complete ICD-10 testing. CollabT contains two roles Organization Administrator and Organization User

- **Organization Administrator** – creates users, creates user access to Test Programs, able to reset any passwords, and able to create and modify all Issues
- **Organization User** – access to assigned Test Programs, create and modify their issues, able to recovery or change their password

Creating a User

Select the settings button on the top right



- Click on the **Users** tab
- Click on **Create**

Home →

Setup/Admin

Home → Setup

Create User

Save Cancel

General

First Name * Business Phone # *

Last Name * Home Phone #

Title Cell Phone #

Address Line 1 Email ID *

Address Line 2

Account Detail

User Name * User Type * Partner Role * Organization User

Account Status * Active

Partner Name A_Venn_Training_Partners

Created On Created By

Last Modified On Last Modified By

Description

- Enter the following information into the corresponding field
- **Enter First Name** – required
- **Last Name** – required
- **Enter Business Phone Number** – required
- **Enter Email ID** (entire email address) – required
- **Auto Populated User Name** – auto populates with the email address.
- **Select Role** – always Organization Administrator or Organization User, required
- **Click Save**

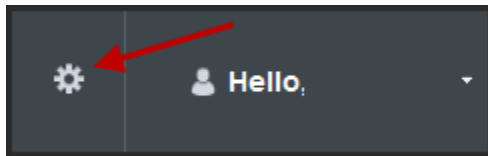
Each user receives an auto generated an initial access email with a temporary password from CS.CollabtEdifecsAdmin@edifecs.com

Exercise 2 – Create User

- ✓ Select Settings icon
- ✓ Select Users tab
- ✓ Select Create Button
- ✓ Create a new user using a personal email address, select save
- ✓ Create a new user from Coders List
- ✓ Select Save

In-activating a User

- Click on the settings button



- Click on the **User** tab
- Click on the **Name** of the user that needs to be in-activated

Setup/Admin							
General		Users					
* Create		Search <input type="text" value="Name"/> <input type="button" value="🔍"/>					
Name	Email Address	Business Phone	Role	Organization	Status	EULA Status	Locked
Ashleigh Venn	avenn06@gmail.com	(515) 974-3146	Organization Administr...	Ashleigh Venn	Active	Accepted	No
Bryan Dempsey	bdempse1@dhs.state....	(515) 974-3156	Organization User	Ashleigh Venn	Active	No Action	No
Paul Ellis	pellis@dhs.state.ia.us	(515) 555-1111	Organization User	Ashleigh Venn	Active	Accepted	No

- Click on **Edit**
- Change the **Account Status*** to **In-Active**
- Click on **Save**

Home → Setup

View User

1st

Edit Save Cancel

General

First Name *	Paul	Business Phone # *	5155551111
Last Name *	Ellis	Home Phone #	
Title		Cell Phone #	
Address Line 1			
Address Line 2			
Email ID *	pellis@dhs.state.ia.us		

2nd

Account Detail

Account Status *	Active	locked	No	Reset Password
Created On	February 12, 2015	Created By	Ashleigh Venn	
Last Modified On	February 12, 2015	Last Modified By	Ashleigh Venn	
EULA Status:	Accepted			

Access

User Type *	Partner	Role *	Organization User
Partner Name	Ashleigh Venn		
Description			

3rd

Exercise 3: Inactive User

- ✓ Navigate to settings icon
- ✓ Click on the personal user name created in Exercise 2
- ✓ Select Edit
- ✓ Change Account Status to inactive
- ✓ Select save

Test Programs

A test program represents a specific workspace and is created to help the payer organization meet a specific business objective, such as monitoring testing progress for a specific specialty. Partner organizations complete test executions to meet the program objective.

Based on the test purpose, a test program can be of one of the following types:

- **ICD-10 test programs:** Act as coding work groups to test the ICD-10 mandate in a collaborative environment. ICD-10 test programs define, relate, and extrapolate the ICD-10 test scenarios and their stipulated execution results of any end-to-end ICD-10 testing. Collaborative Testing uses real medical records for the test scenarios and provides information on the outcome of the coding work group. For example, an ICD-10 diabetes test program would encompass all ICD-10 diabetes coding work group test scenarios.
- **Validation test programs:** Validate healthcare EDI transaction sets uploaded by partners for compliance with payer guidelines and standards.

As part of the IME administrative setup, the ICD-10 Test Team creates and assigns Test Programs based on the Test Partner's practice. In addition to the initial access email, CollabT creates an auto generate invitation email from CS.CollabtEdifecsAdmin@edifecs.com for each program.

From: CS.CollabtEdifecsAdmin@edifecs.com
Date: December 8, 2014 at 1:21:53 PM CST
To:
Subject: Test Program participation Invite.
Reply-To: CS.CollabtEdifecsAdmin@edifecs.com

Sample Email ONLY

You are invited by Iowa State Medicaid Agency to participate in Testing the MMIS_CORE_PGM1 Test Program. You can access the Test Program by using your Login credentials.

Test Methodologies

E2E (Batch) Testing

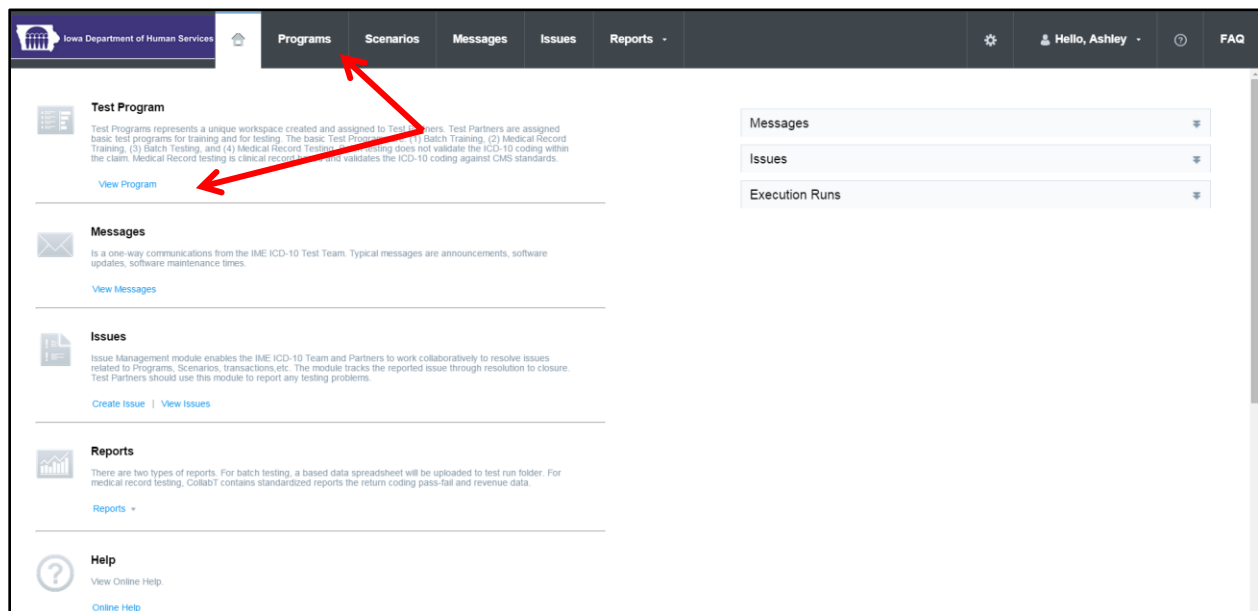
Administrator and Users may upload Electronic Data Interchange (EDI) 837 batch transaction sets for 837P for professionals, 837I for institutions and 837D for dental practices. CollabT E2E testing facilitates comparison of ICD-9 and ICD-10 coded claims. Each Test Partner is assigned a batch program that is used for actual testing with results being reported to CMS, IME management and the IME Provider community.

During the initial configuration, the IME ICD-10 Test Team works with a Test Partner's primary administrator to setup the CollabT environment. This setup includes:

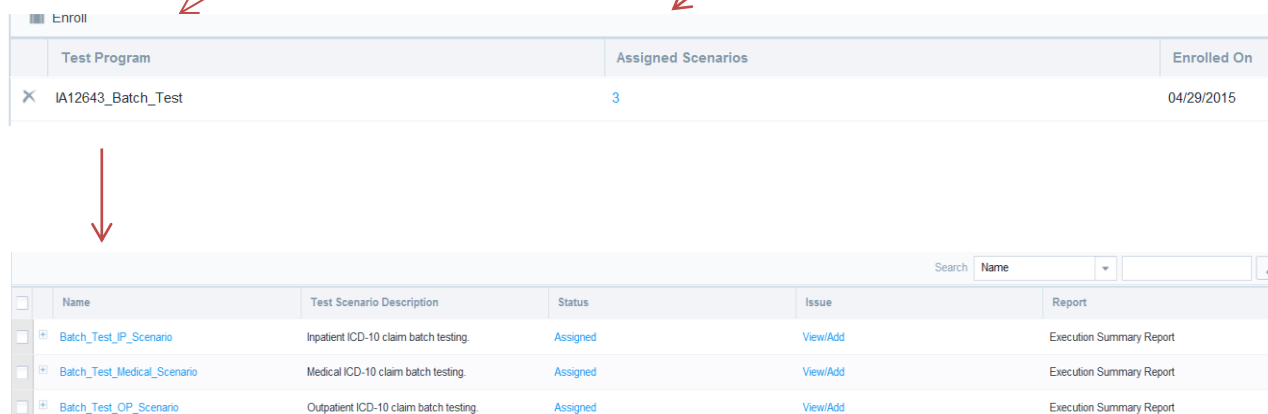
- Test Partner specific environment
- 837 Envelop Information
- User Creation
- Current list of Issues

View and Select E2E Test Program

To view the assigned Test Programs select View Programs from the Home page.



- Click on the batch test that has already been assigned to your NPI
- You will see a 1, 2 or 3 under Assigned Scenarios, click on the number
- You will have up to 3 scenarios assigned to you depending on the type of claim forms you submit



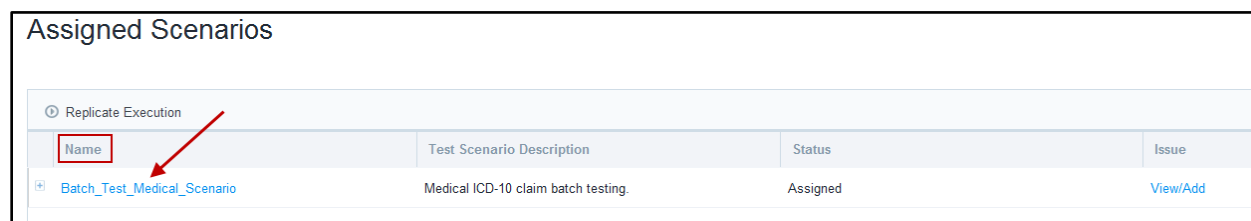
Test Program	Assigned Scenarios	Enrolled On
IA12643_Batch_Test	3	04/29/2015

Name	Test Scenario Description	Status	Issue	Report
Batch_Test_IP_Scenario	Inpatient ICD-10 claim batch testing.	Assigned	View/Add	Execution Summary Report
Batch_Test_Medical_Scenario	Medical ICD-10 claim batch testing.	Assigned	View/Add	Execution Summary Report
Batch_Test_OP_Scenario	Outpatient ICD-10 claim batch testing.	Assigned	View/Add	Execution Summary Report

Navigating to ICD-10 Assigned Scenarios

CollabT does not validate that the claims within the batch are UB04 or CMS 1500. The IME ICD-10 Test Team will set up E2E Scenarios to meet the Test Partners administrative needs. These scenarios are created to assist with revenue/cost analysis.

- Click on the **Name** of the Assigned Scenario



Name	Test Scenario Description	Status	Issue
Batch_Test_Medical_Scenario	Medical ICD-10 claim batch testing.	Assigned	View/Add

Naming Execution Run and Notes

- CollabT navigates to the **General Tab**
- Enter an **Execution Run Name** – the Execution Run Name is determined by the User testing. The user may also enter text into the notes field. The remaining fields on the General Tab are set by the IME.

Home → Test Programs → Assigned Scenarios

Test Execution

Save Save & Submit Cancel

General File and Attachments Reports

Execution Name *

Execution Run Status Pending Submission

Transaction Type 837 Institutional

Substitute Member Data No

Notes

Scenario Name Batch_Validation_Institutional1

Description This scenario is for UB04 or 837I batch upload for inpatient and outpatient claims

Purpose/Mandate Validation

Comments Batch_Validation_Institutional1

- The IME Run Name should follow this sequence: Partner Name_Claim Type_Misc Info.
An example is: IME_9_Inpat Batch 1 IME_10_Inpat Batch 1

Uploading X12 837 File

- Select the **File and Attachments** tab

Home → Test Programs → Assigned Scenarios

Test Execution

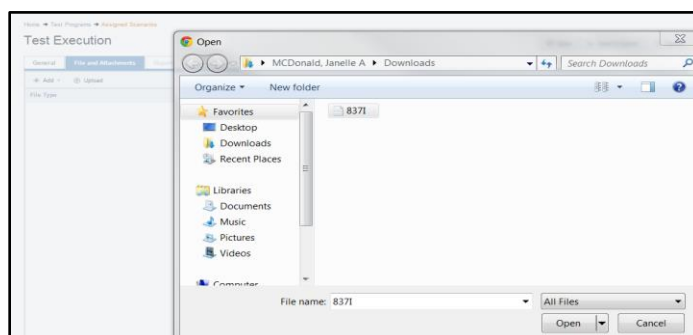
Save Save & Submit Cancel

General File and Attachments Reports

+ Add + Upload

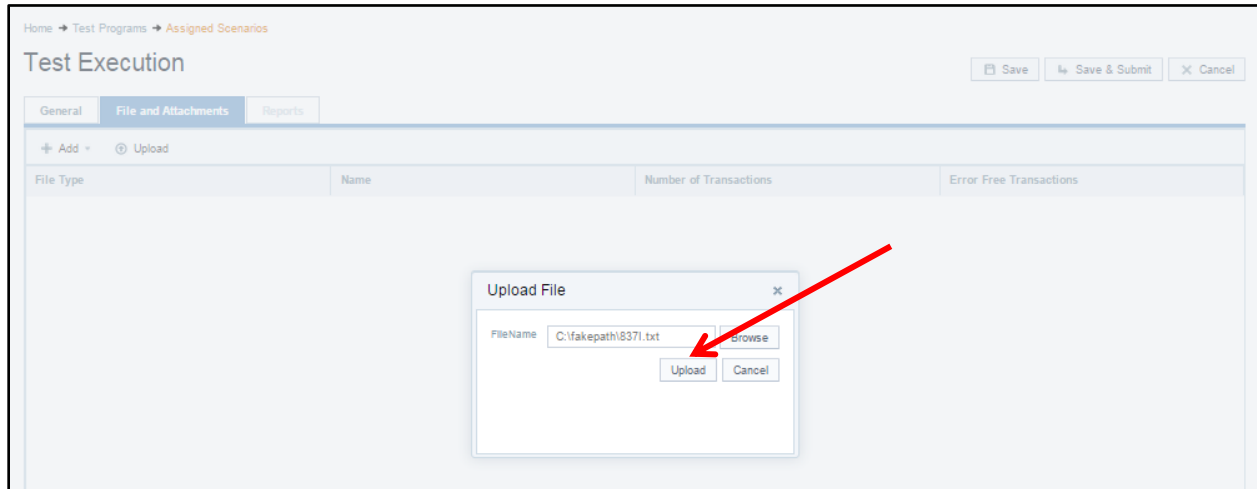
File Type	Name	Number of Transactions	Error Free Transactions

- Select the **Upload** button
- Browse to the batch file location to add the 837 X12 file, this file **cannot be a flat file and must be in .txt format**

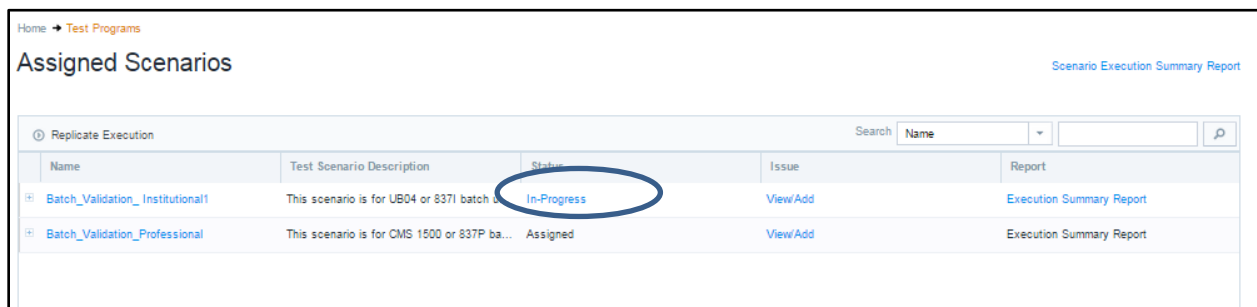


- Select the **File**
- Select **Open**

- Select **Upload**



- Select **Save**
- CollabT navigates back to **Assigned Scenarios** and changes the status to In-Progress. The file is not submitted to the claims test environment.



Exercise 4: Upload an E2E batch file

- ✓ Navigate to Batch TestingProgram
- ✓ Select Validation Scenario
- ✓ Name Execution Run
- ✓ Upload X12 837 File
- ✓ Save

Execute an In-Progress/Pending Submission Run

- Select the expansion icon on the left side

Home → Test Programs

Assigned Scenarios

Scenario Execution Summary Report

Replicate Execution

Search Name

Name	Test Scenario Description	Status	Issue	Report
Batch_Validation_Institutional1	This scenario is for UB04 or 837I batch u...	In-Progress	View/Add	Execution Summary Report

Execution Run Name	Date	Status	Execution Result	Created By
837I_Trng_Run_DoNotProcess	03/03/2015	Pending Submission	Unknown	Janelle McDonald

Page 1 of 1

Displaying 1 - 1 of 1

- Select the **Execution Run Name** for that has Pending Submission as the status
- CollabT navigates to the pending Execution Run

Home → Test Programs → Assigned Scenarios

837I_Trng_Run_DoNotProcess

Last modified on 2015-03-03 by Janelle McDonald

Save Save & Submit Cancel

General File and Attachments Reports

Execution Name * 837I_Trng_Run_DoNotProcess

Execution Run Status Pending Submission

Transaction Type 837 Institutional

Substitute Member Data No

Notes This is a training run for the instructions manual do not process

Scenario Name Batch_Validation_Institutional1

Description This scenario is for UB04 or 837I batch upload for inpatient and outpatient claims

Purpose/Mandate Validation

Comments Batch_Validation_Institutional1

- Select **Save & Submit** button
- CollabT navigates to the **Assigned Scenario** page
- Click on **Save and Submit**

Exercise 5: Execute an In-Progress Run

- ✓ Navigate to Scenario
- ✓ Expand the scenario
- ✓ Select The Execution Run Name
- ✓ Select Save & Submit

B2B (Clinical/Coding) Testing

The B2B Test Programs are setup by the IME using CollabT clinical case library that contains over 2700 individual claims, also known as *Scenarios*. These scenarios may be grouped together by provider taxonomy, clinical location, or other groupings. The IME ICD-10 Test team works with Test Partners to select the Test Program. Partners must complete a seed data spreadsheet so their provider information can be assigned to the scenarios. Each Test Partner is assigned a minimum of two B2B programs. **XXXXX_Trng_Program** is used for training and practice with the software prior to actual testing. **XXXXX_Testing** is used for actual testing with results being reported to CMS, IME management and the IME Provider community.

During the IME Remediation phase of ICD-10 implementation, the Team identified the following Medicare Severity Diagnosis Related Groups (MS-DRG) has high risk/high dollar test targets:

- **MS-DRG Group 1:** DRG's 4, 56-57, 99, 100-101, 133-134, 152-153, 155-156, 163-165, and 166-168 (22 Total Scenarios)
- **MS-DRG Group 2:** DRG's 189, 193-195, 202-203, 208, 233-234, 248-249, 280-282, 291-293, and 299-301 (25 Total Scenarios)
- **MS-DRG Group 3:** DRG's 304-305, 308-310, 312, 313, 326-328, 377-379, 391-392, 417-418, 460, 469-470, and 493-494 (23 Total Scenarios)
- **MS-DRG Group 4:** DRG's 511-512, 536, 551-552, 556, 602-603, 638-639, 640-641, 656-658, 689-690, and 713-714 (20 Total Scenarios)
- **MS-DRG Group 5:** DRG's 765-766, 767, 774-775, 776, 781, 789, 792, 793, 794, 795, 811-812, 871-872, 881, 884, 885, 895-897, 917-918 (31 Total Scenarios)
- **Custom Groupings:** The IME ICD-10 Team will work Test Partner to setup appropriate Test Programs and Test Scenarios.

View and Select B2B Test Program

To view the assigned Training and Test Programs select View Programs from the Home page.

Iowa Department of Human Services

Programs Messages Issues Reports

Test Program

Test Programs represents a workspace created and assigned to Test Partners. Test Partners are assigned basic test programs for training and for testing. The basic Test Programs are: (1) Batch Training, (2) Medical Record Training, (3) Batch Training, (4) Medical Record Training. Batch training does not validate the ICD-10 coding within the claim. Medical Record Training is clinical record based and validates the ICD-10 coding against CMS standards.

[View Program](#)

Messages

Is a one-way communications from the IME ICD-10 Test Team. Typical messages are announcements, software updates, software maintenance times.

[View Messages](#)

Issues

Issue Management module enables the IME ICD-10 Team and Partners to work collaboratively to resolve issues related to Programs, Scenarios, transactions, etc. The module tracks the reported issue through resolution to closure. Test Partners should use this module to report any testing problems.

[Create Issue](#) | [View Issues](#)

Reports

There are two types of reports. For batch testing, a based data spreadsheet will be uploaded to testrun folder. For medical record testing, CollobT contains standardized reports the return coding pass-fail and revenue data.

[Generate Reports](#)

Help

[View Online Help](#)

[Online Help](#)

Messages

Subject	Received On	Sent By
---------	-------------	---------

Issues

Issue ID	Description	Status
200007	test	Open Partner
200301	Test 02 - weird	Open Partner

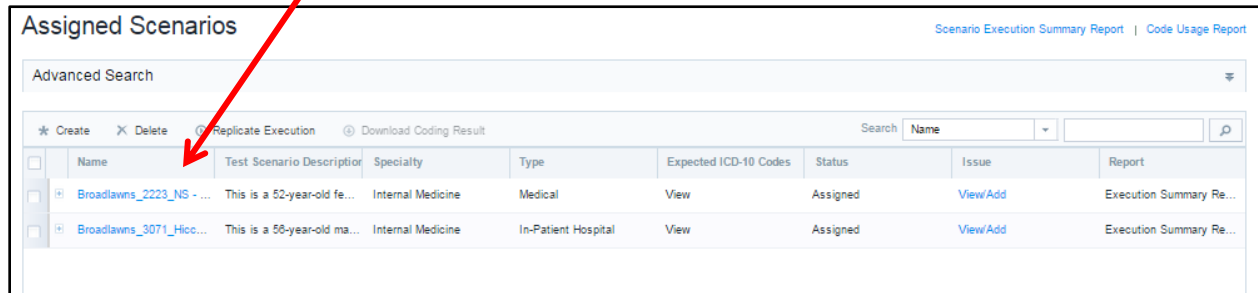
- Select **XXXXX_B2B_Trng** Test Program

Test Programs

Search <input type="text" value="Name"/> <input type="text" value="Trng"/>						
Name	Description	Type	Status	Progress Report	View Program Details	Enrolled On
Batch_Trng_Program	TEST PARTNER TRAINING B...	Validation	In Progress	Report	Details	03/02/2015
Medical_Scenario_Trng	TEST PARTNER TRAINING O...	ICD10	In Progress	Report	Details	03/02/2015
Broadlawns_B2B_Trng	This test program is for B2B ...	ICD10	In Progress	Report	Details	03/05/2015

Navigating to B2B Test Scenarios

- Select the **Scenario** hyperlink



Assigned Scenarios Scenario Execution Summary Report | Code Usage Report

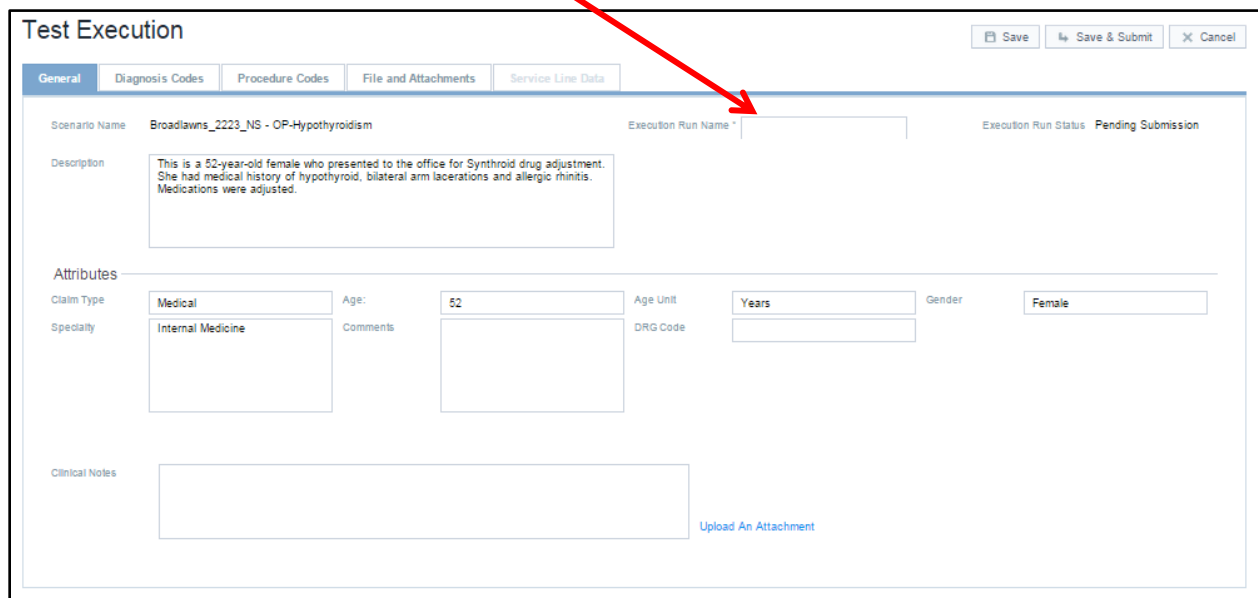
Advanced Search

* Create X Delete Replicate Execution Download Coding Result Search Name

	Name	Test Scenario Description	Specialty	Type	Expected ICD-10 Codes	Status	Issue	Report
<input type="checkbox"/>	Broadlwns_2223_NS - ...	This is a 52-year-old fe...	Internal Medicine	Medical	View	Assigned	View/Add	Execution Summary Re...
<input type="checkbox"/>	Broadlwns_3071_Hicc...	This is a 58-year-old ma...	Internal Medicine	In-Patient Hospital	View	Assigned	View/Add	Execution Summary Re...

Naming the Execution Run

- CollabT opens the scenario **General Tab**
- Review the general description
- Enter the **Execution_Run_Name**



Test Execution Save Save & Submit Cancel

General Diagnosis Codes Procedure Codes File and Attachments Service Line Data

Scenario Name Broadlwns_2223_NS - OP-Hypothyroidism Execution Run Name * Execution Run Status Pending Submission

Description This is a 52-year-old female who presented to the office for Synthroid drug adjustment. She had medical history of hypothyroid, bilateral arm lacerations and allergic rhinitis. Medications were adjusted.

Attributes

Claim Type Medical Age: 52 Age Unit Years Gender Female

Specialty Internal Medicine Comments DRG Code

Clinical Notes Upload An Attachment

Viewing B2B File and Attachments

- Navigate to the **File and Attachments Tab**

Test Execution

SaveSave & SubmitCancel

GeneralDiagnosis CodesProcedure CodesFile and AttachmentsService Line Data

Upload

	File Type	Name	Description
④	Scenario other attachment file	2223_OP-820.doc	
④	Scenario ICD-9 claim file	Scenario2223.txt	

There are two Files and Attachment associated with each Scenario:

- Other Attachment which is a medical record
- ICD-9 X12 837 claim file
- Click on the ***.doc hyperlink** to download the medical record

DATE OF ADMISSION: 07/28/2010
DATE OF DISCHARGE: 07/30/2010
LOS: 2
AGE: 59
GENDER: Female

Sample Only

CHIEF COMPLAINT : Right bundle branch block

HISTORY AND PHYSICAL
HISTORY OF PRESENT ILLNESS:
The patient is a delightful 59-year-old woman referred from her primary care provider for complete heart block. She has an antecedent history of tobacco use, hypertension, and obesity. She was evaluated for an abnormal EKG (right bundle branch block) in the fall at which time a stress echo demonstrated no evidence of provoked ischemia, however, her heart rate response to exercise was limited. She has had no anginal symptoms. There is no known history of diabetes or dyslipidemia.

During the Test Partner administrative setup, the ICD-10 Team uploads Provider and Member Seed data and assigns them to the Test Partner. Member Seed data is optional.

After reading the medical record and determining the ICD-10 diagnosis and procedure Codes

- ## Test Execution

General	Diagnosis Codes	Procedure Codes	File and Attachments	Service Line Data
Actual ICD-10 Diagnosis Codes				
Principal Diagnosis	<input type="text" value="2449"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	
Other Diagnosis 1	<input type="text" value="4779"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 2 <input type="text" value="8940"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 4	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 5 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 7	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 8 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 10	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 11 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 13	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 14 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 16	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 17 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 19	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 20 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
				Other Diagnosis 21 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/>

Actual ICD-10 Diagnosis Codes (Please add/update diagnosis code pointers using business form view for uploaded EDI claim transaction. For further instructions, please refer to online Help.)

Principal Diagnosis	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	
Other Diagnosis 1	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 2 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 4	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 5 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 7	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 8 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 10	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 11 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
Other Diagnosis 13	<input type="text" value="Select Code"/>	<input type="text" value="Present On Admission(POA)"/>	<input type="text" value="Select Code"/>	Other Diagnosis 14 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/> <input type="text" value="Select Code"/>
				Other Diagnosis 15 <input type="text" value="Select Code"/> <input type="text" value="Present On Admission(POA)"/>

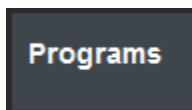
- Navigate to the **Procedure Codes Tab**
- Enter the procedure code(s), if appropriate

- Select **Save and Submit**

CollabT masks the ICD-10 coding based on parameters created during Test Partner setup. The default is three coding attempts before expected coding results are visible to the user.

View the ICD-10 Coding results

- Click on the **Program** Tab
- Select the **Name** of the test program.



Test Programs			
Name	Description	Type	Status
MMIS_CORE_PGM1	MMIS_CORE_PGM1	ICD10	In Progress

- Select the scenario **Name** that the user wishes to view the ICD-10 results

Assigned Scenarios

Advanced Search

[* Create](#)
[X Delete](#)
[⌚ Replicate Execution](#)
[📄 Download Coding Result](#)

<input checked="" type="checkbox"/>	Name	Test Scenario Description	Specialty	Type	Expected ICD-10 Codes	Status
<input checked="" type="checkbox"/>	IME_3070_Right bundle branch hear...	The patient is a 59-year-old female w...	Interventional Cardiology	In-Patient Hospital	View	Assigned

- Click the **View** link under Expected ICD-10 Codes

[* Create](#)
[X Delete](#)
[⌚ Replicate Execution](#)
[📄 Download Coding Result](#)

<input type="checkbox"/>	Name	Test Scenario Description	Specialty	Type	Expected ICD-10 Codes
<input type="checkbox"/>		The patient is a very pleas...	Foot and Ankle Surgery	Out-Patient Hospital	View

Expected ICD-10 Codes

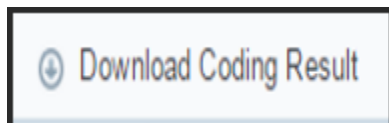
[Diagnosis Codes](#)
[Procedure Codes](#)

Search Code Position

Code Position	ICD Code	Description	Present on
Principal Diagnosis	T8131XA	T8131XA Disruption of external operation (sur...	
Patient Reason For Visit 1	T8131XA	T8131XA Disruption of external operation (sur...	
Other Diagnosis 1	M86171	M86171 Other acute osteomyelitis, right ankle...	
Other Diagnosis 2	Z9889	Z9889 Other specified postprocedural states	

Downloading Expected ICD-10 Codes

- Click on **Download Coding Results**.



- Choose **PDF** or **CSV** format

- Click **Download**

Download Results

I want to download

☒ PDF ☐ CSV

Collaborative Testing will only download:


- The first 30 execution runs of all selected execution runs/scenarios.
- Execution runs not in the state "Pending Submission".
- Execution runs not with the result "Not Applicable".
- Execution runs of scenarios not in the states "Draft", "Rejected" or "Pending Approval".

Download

Cancel

Requesting Payment Variance Reports

- Click on **Reports**



The screenshot shows the 'Test Execution' page with the 'Reports' dropdown menu open. The menu options are: Progress Report, Issue Report, Payment Variance Report - ICD10, and Payment Variance Report - Batch. A red arrow points to the 'Reports' menu item in the top navigation bar.

Execution Run Reports

Execution Run Values

CollabT contains *Status* and an *Execution Result* values for each execution name. At any point within the run a user may create an issue and assign the issue to the appropriate person. More information on logging Issues is available in the Issues section of this manual. Table 1 and Table 2 list the values and the value descriptions.

Table 1: Execution Run Results

Execution Result	Meaning
Unable to Validate/Error	Specifies that there is a system error because of which the 837 file cannot be validated
Pending Submission	Specifies that the 837 file is not submitted for validation and processing
Submitted	Specifies that the 837 file is submitted for validation and processing
Validating	Specifies that the 837 file with multiple claims is being validated based on the Pass Criterion
Validated	Specifies that the 837 file is validated based on the Pass Criterion
Rejected	Specifies that either the file validation failed or the request file is rejected

The third column in your table indicates the status of the file validation, kindly refer to the table below for detailed explanation.

Table 2: Execution Run Status

Status	Description
Pass	Specifies that the 837 data file is in compliance with the guidelines and that the claim data in the file meets the Pass Criterion set by the payer
Fail	Specifies either that the 837 data file is not in compliance with the guidelines or that the claim data in the file does not meet the Pass Criterion set by the payer

If Execution Run Status is “[Rejected](#)” and the Execution Results is “[Fail](#)” the error reports pertain to compliance with 837 transaction sets under EDI 5010. [Please log an issue within CollabT – See Logging an Issue section in the manual.](#) The IME will work our Test Partners to resolve these errors.

View Execution Run Reports

- Navigate to the **Test Program**
- Navigate to the **Scenario**
- Select the expansion icon on the left side

Assigned Scenarios Scenario Execution Summary Report

Replicate Execution Search: Name

Name	Test Scenario Description	Status	Issue	Report
Batch_Validation_Institutional	Batch testing for Institutional claims.	Archived	View/Add	Execution Summary Report
Batch_Validation_Institutional1	This scenario is for UB04 or 837I batch uplo...	In-Progress	View/Add	Execution Summary Report

Execution Run Name	Date	Status	Execution Result	Created By
ICD-9_Run-_202109	03/03/2015	Rejected	Fail	Keshava Subramanya
ICD-9_Run-_202108	03/03/2015	Rejected	Fail	Keshava Subramanya
ICD-9_Run-_202107	03/03/2015	Response Awaited	Pass	Keshava Subramanya
ICD-9_Run-01	02/18/2015	999 Received	Pass	Keshava Subramanya
ICD-10_Run-01	02/18/2015	999 Received	Pass	Keshava Subramanya

Page 2 of 10 Displaying 11 - 15 of 15

- Click on the **Execution Run Name**

Depending on the run status and execution result value there will be error reports and/or File and Attachments. The follow screen prints represent various results.

Figure 1: Execution Run 999 Received Pass

ICD-9_Run-01 - Last modified on 2015-02-23 by System Replicate Execution Cancel

General File and Attachments Reports

File Type	Name	Number of Transactions	Error Free Transactions
835 Health Care Claim Payment/Advice File	Show Response	N/A	N/A
837 Health Care Claim File	5552227772201525209007201821upoCO.TXT	110	84
Payer 999 Acknowledgement	Show Response	N/A	N/A
Payer 277CA Response	Show Response	N/A	N/A
Partner Edi File	C5822571.9C - ICD9.txt	110	84
Log File	MemberSubstitutionLog.html	N/A	N/A

Figure 2: Execution Run Rejected Fail

837I_Trng_Run_DoNotProcess
- Last modified on 2015-03-03 by System
Replicate Execution
Cancel

General
File and Attachments
Reports

Interleaved -All Data and Errors
Interleaved -Errors Only
Summary -By File
Summary -By Transaction
Download Repo

Compliance Report
Layout: Interleaved - Errors Only
Submitted: Tuesday, March 03, 2015 11:08:38 PM (GMT)

Iowa State Medicaid Agency Community

This report shows the results of a submitted data file validated against a guideline. If there are errors, you must fix the application that created the data file and then generate and submit a new data file.

Test Summary		Page Information	
Failed 0% Acceptance Required for Pass		Program Name: Batch_Trng_Program Task Name: Batch_Validation_Institutional1 Guideline Name: Default Data File Name: 837I.txt Data Submitted By: A_Venn_Training_Partner	

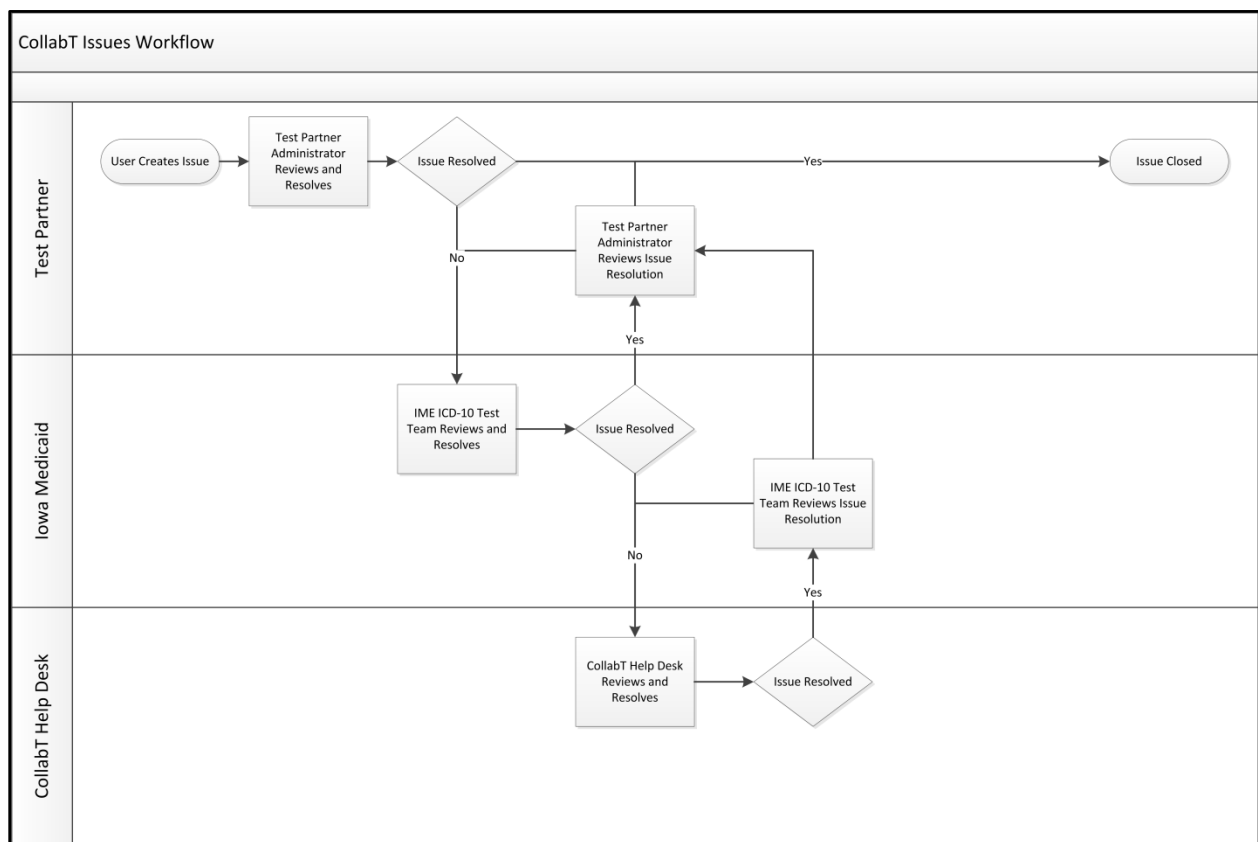
#	Data
	Document Errors at Document level: 0 Interchange Received: 1 Interchange Accepted: 0
1	Interchange Errors at Interchange level: 2 Functional Group Processed: 1 Functional Group Received: 1 Functional Group Accepted: 0 Sender: ZZ/IA001618 Receiver: ZZ/IA001618 Qualifier/ID: 000110743 Control: 00501 Version: 00501 Number: 150303 Date: 1056 Time: 1056

#	Error ID	Error Message	Error Data	Severity	Guideline Properties
1	9:9210816	The Element ISA03 does not include any significant data characters. Segment ISA is defined in the guideline at position N/A. This error was detected at: Segment Count: 1 Element Count: 3	ISA'00' *M* *ZZ'IA001618 *ZZ'IA001618 *150303'1056'J'00501 '000110743'0'P'>	Normal	Element: ISA03 Name: Security Information Qualifier: I03 ID: Standard

Issues

In Collaborative Testing, you can associate an issue with each test scenario, assign the issue to a payer or a partner, and track the issue closure. You can also discuss the issue, the testing parameters, and the possible outcomes of the test. This conversation history is captured as comments and stored in Collaborative Testing.

Issues Work Flow



IME ICD-10 Issue Lead: Shivashankar Biradar

Create an Issue

You can log issues for a particular test program. You can view and manage issues from two places—the Issues tab on the action bar and Issues on the Home page.

To create an issue:

- Open CollabT
- On the action bar, click the Issues tab
- Click Create.
- On the Create Issue page, enter a short description of the issue. If you are receiving an error message use the error message as the description.
- In the Program Name, Severity, and Category fields,
- Select the correct options from the drop-down lists.
- Select the status of the issue from the drop-down list. For example, select Open Partner to indicate that the issue is in the partner bucket for action.
- Enter values in all the other fields as required.
- Click Save to save the issue.

An automated notification is sent to the issue owner.

The screenshot shows the 'Create Issue' form. The 'General' tab is active. The 'Short Description *' field is empty, with a 'Save' button to its right. Below this, the 'Program Name *' dropdown is set to 'Broadlawns_B2B_Trng'. The 'Severity *' dropdown is empty. The 'Status *' dropdown is open, showing 'Open Partner' as the selected option. Other status options include 'Closed', 'Closed Pending Community Owner Confirmation', 'Closed Pending Partner Confirmation', 'Open Community Owner', and 'Open Partner'. The 'Category *' dropdown is empty. The 'Test Scenario' field is empty. The 'Description *' field is empty.

Issue Status

- **Open Partner:** Indicates pending action from the partner.
- **Open Community Owner:** The issue has been assigned to the IME ICD-10 Issues Lead or the CollabT Help Desk
- **Closed Pending Community Owner Confirmation:** The CollabT Help Desk has resolved the issue and returned the Issue to the ICD-10 for confirmation of the resolution.

- **Closed Pending Partner Review:** The issue has been resolved and reviewed by the IME ICD-10 Team. The Partner reviews and closed the issue.
- **Closed:** Indicates that the issue has been closed and requires no further action by anyone. The user who created the issue is the one who can close the issue. You can close the issue at any point of time irrespective of its status.

Issue Severity

Create Issue

General

Attachment

Short Description *

Save

Program Name *

Broadlawns_B2B_Tmg

Severity *

1 - Critical
2 - Serious
3 - Important
4 - Routine
5 - Defer

Status *

Open Partner

Category *

Test Scenario

Description *

The severity of an issue is determined by the Test Partner when opened

Messages

CollabT allows the IME ICD-10 Test Team to communicate with Test Partners. The Test Team may broadcast messages on system downtime or announce the creation of a new test program. This facility allows you to send e-mail messages on maintenance issues or other generic messages to the community.

Additionally, the Test Team may send messages to a selected test programs or partners. For example, if any one issue has been reported by several Test Partners for a specific Test Program, the IME will consolidate the issues into one joint issue. The resolution will be broadcast to all Test Partners using the Test Program.

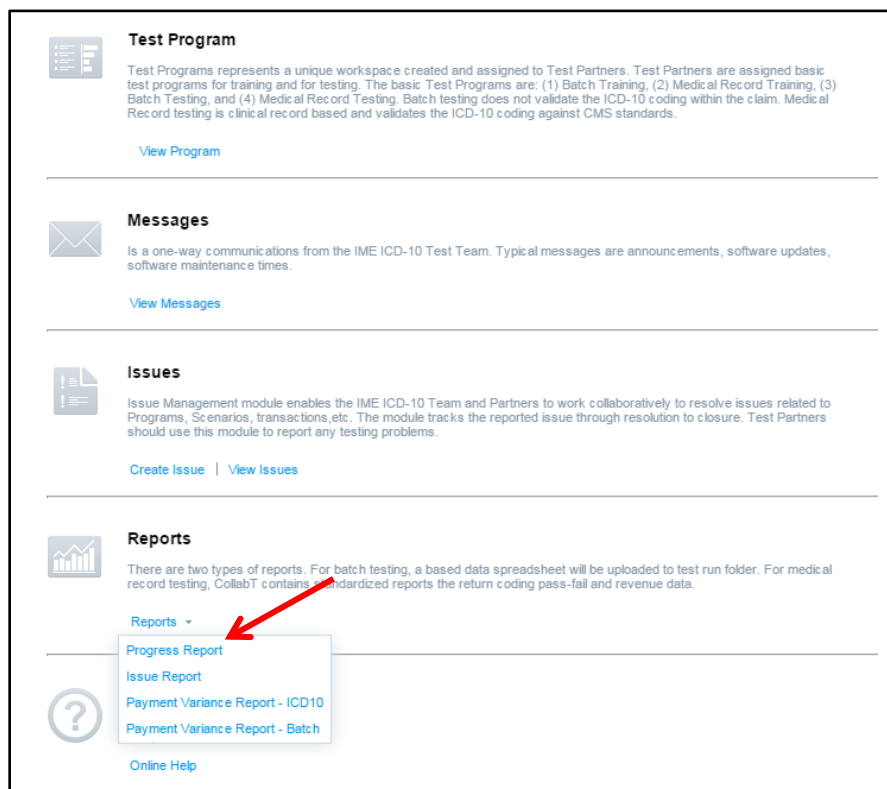
You can view and manage message information from two places—the **Messages** tab on the action bar and **Messages** on the Home page.

Reports

The Reports tab returns data from E2E and B2B testing. . Reports can be requested on progress, issues, and payment variance for B2B and E2E.

Report Generation

- Navigate to the **Home Page**
- Select **Reports**



The screenshot shows the CollabT interface with four main sections: Test Program, Messages, Issues, and Reports. The Reports section is highlighted with a red arrow pointing to the 'Reports' dropdown menu. The dropdown menu is open, showing four options: Progress Report, Issue Report, Payment Variance Report - ICD10, and Payment Variance Report - Batch. Below the Reports section is an 'Online Help' link.

Test Program

Test Programs represents a unique workspace created and assigned to Test Partners. Test Partners are assigned basic test programs for training and for testing. The basic Test Programs are: (1) Batch Training, (2) Medical Record Training, (3) Batch Testing, and (4) Medical Record Testing. Batch testing does not validate the ICD-10 coding within the claim. Medical Record testing is clinical record based and validates the ICD-10 coding against CMS standards.

[View Program](#)

Messages

Is a one-way communications from the IME ICD-10 Test Team. Typical messages are announcements, software updates, software maintenance times.

[View Messages](#)

Issues

Issue Management module enables the IME ICD-10 Team and Partners to work collaboratively to resolve issues related to Programs, Scenarios, transactions, etc. The module tracks the reported issue through resolution to closure. Test Partners should use this module to report any testing problems.

[Create Issue](#) | [View Issues](#)

Reports

There are two types of reports. For batch testing, a based data spreadsheet will be uploaded to test run folder. For medical record testing, CollabT contains standardized reports the return coding pass-fail and revenue data.

[Reports](#) ▾

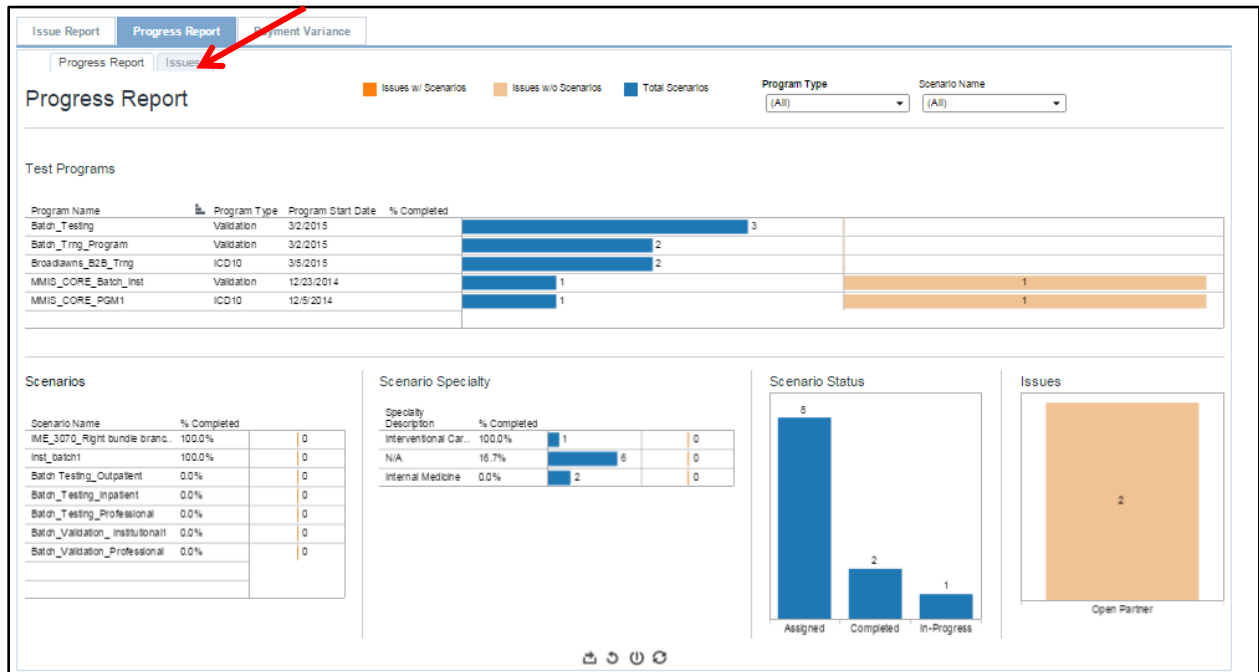
- [Progress Report](#)
- [Issue Report](#)
- [Payment Variance Report - ICD10](#)
- [Payment Variance Report - Batch](#)

[Online Help](#)

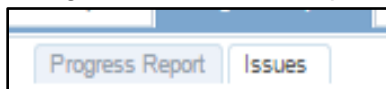
Progress Report

- Navigate to **Progress Report tab**

CollabT opens to the Progress Report for Test Programs and Scenarios

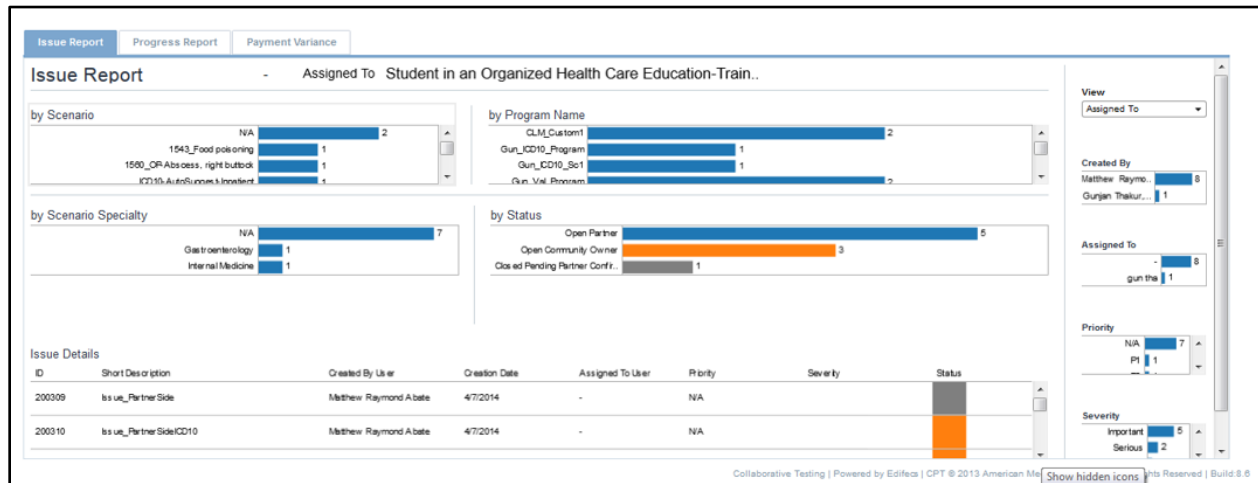


- Navigate to the Issues report by selecting the Issue Tab



Issue Report

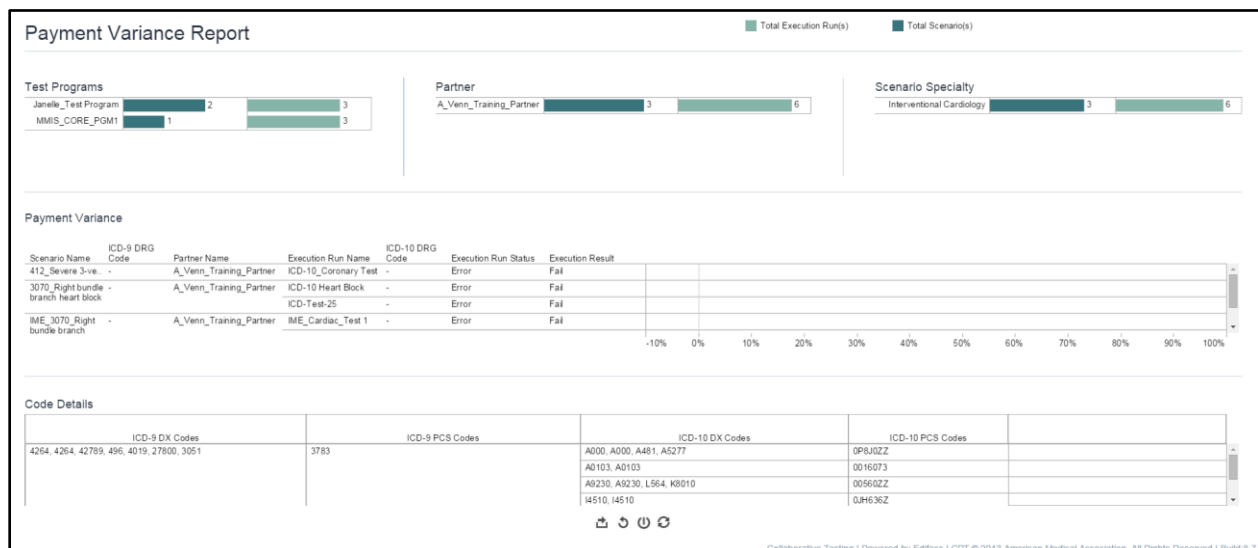
Collaborative Testing allows you to view the details of issues logged against a particular test program by grouping them.



Payment Variance

Once you process your 837 submitted claims in your test environment and the claim passes successfully through the adjudication system, partners can request payment variance reports for both batch and scenario ICD-10 execution runs and saves them.

- Payment Variance Report-ICD10:** This generates payment variance report for B2B execution runs. Within the report users have the ability to drill down by program, partners/providers, specialties, and scenarios.



- **Payment Variance Report- Batch:** The partner will request a payment variance report for E2E execution runs. In order to request a variance report select **Create**.

Payment Variance Report - Batch

- **Step 1:** Enter a **Report Name**
- **Step 2:** Select a **Base Execution Run** and a **Target Execution Run**. These are the two execution runs you wish to compare. In most cases this will be the batch of ICD-9 and like ICD-10 batches.
- **Step 3:** Customize the criteria you want the report to match.

Home → Payment Variance Report - Batch

Create Payment Variance Report

[Generate Report](#) [Cancel](#)

Step 1 : Report Details

Created By: Ashley Savonell Created On: 03 Apr 2015 10:44:22

Report Name * Description

Step 2 : Select Base and Target Execution Runs

Base Execution Run * Target Execution Run *

Total Claims Total Claims

Claim Type Claim Type

Step 3 : Select Claim Matching Criteria

- ☒ Provider Information
- ☒ Patient Information
- ☐ CLAIM ID (CLM01)
- ☒ Claim Charge Amount (CLM02)
- ☐ Submitter Claim ID (REF*D9)
- ☒ Payer Claim Control Number (REF*F8)
- ☒ Medical Record Number (REF*EA)

Glossary

Term	Definition
835	The EDI 835 Health Care Claim Payment and Remittance Advice. This transaction is used to detail the charges paid, reduced or denied. Also, any bundling or splitting of the claims or claim lines. The detail from the an ICD-10 835 may be compared to an ICD-9 835 to determine cost neutrality or revenue
837D	American Dental Association (ADA) EDI claim transaction
837I	Universal Billing form CMS 1450 EDI transaction for inpatient and outpatient claims
837P	CMS 1500 EDI transaction for professional claims
Business-to-Business (B2B)	Medical record based scenarios. Evaluates the ICD-10 code for correctness against the ICD-9 claim and medical record. Returns coding pass/fail report and revenue comparison data.
CollabT	IME testing tool that allows partners to submit E2E and B2B claims.
Direct Claims Submission	Testing through EDISS direct upload.
EDIFICS	This is the contractor that developed the testing tool known as CollabT. This term is not used when presenting ICD-10 claims testing materials.
EDISS	This term refers to EDI Support Services for the Core MMIS. This term is used only when presenting testing to Partners who have selected not to use the CollabT testing tool.
End-to-End (E2E)	Batch claim testing with batches being submitted directly to EDISS or CollabT.
IME Administrator	Individual working on the ICD-10 project with CollabT administrative permissions.
IME User	Individual working on the ICD-10 Project with CollabT user permissions
Organization	Iowa Medicaid Enterprise (IME)
Partner	External claim submitter using CollabT tool. These are healthcare organizations, individuals, Clearinghouses and billing organizations with billing NPIs.
Partner Administrator	Individuals CollabT granted the Administrator security access type. There be one or many. The initial Partner Administrator may add new Partner users and/or Partner Administrators.
Partner User	Individuals granted the user security access type to CollabT by a testing partner.
Payer	In CollabT, a payer is the organization responsible for conducting external testing in collaboration with partners for different test scenarios under test programs that the partners are enrolled to.
Provider	This is an individual providing point-of-care for a patient in the attending, rendering or referring position on a claim.

